laid down, the State Police are required to submit their proposal for augmentation of Government Railway Police after getting approved by the respective State Government and submit to the Zonal Railway General Managers concerned for their approval, after obtaining concurrence of the Associate Finance. Thereafter, the Ministry of Railways examines the proposal for final approval. The Ministry of Railways have not received any such proposals.

Absorption of retrenched steam locomotive workers

*158. SHRI RAVULA CHANDRA SEKAR REDDY: Will the Minister of RAILWAYS be pleased to state:

(a) whether 5000 retrenched steam locomotive workers will be absorbed by the Railway Ministry after ten years;

(b) if so, the details of programme of their absorption; and

(c) how will their services be utilised?

THE MINISTER OF RAILWAYS (SHRI LALU PRASAD): (a) to (c) No steam locomotive regular worker has been retrenched by the Ministry of Railways. With the era of steam traction coming to an end on the Indian Railways, the steam locomotive workers have been re-deployed on the Indian Railways system. However, there were numerous contract labours who were engaged in coal and ash handling activities related to steam traction. These activities are no more there and therefore the contracts have been closed.

The issue of absorption/regularization of contract labours including those engaged in coal and ash handling have repeatedly been considered by the Hon'ble Courts and the Government.

Based on the various judicial pronouncements and decisions of the Government, it has been decided that such contract labours may be absorbed on the Railways subject to the following:

(i) Need for recruitment for example men/labour in the Railways preferably in the job in which he was working.

(ii) The genuineness and authenticity of each and every claimant for regularization is to be established.

(iii) The contract labour is medically fit as per the recruitment rules.

(iv) The contract labour is within the age limit as per recruitment rules after giving him the benefit of number of days he has served the Railways as a contract labour.

On the above basis, the Railways administration have commenced the screening procedure to absorb/regularize these contract workers.

Infant mortality

*159 SHRI SHAHID SIDDIQUI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the infant mortality rate in Government Hospitals;

(b) if so, the details thereof, hospital-wise;

(c) the reasons of infant mortality; and

(d) what action is being taken to control this?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (d) It is difficult to calculate infant mortality rate on the basis of deaths of infants occuring in a hospital as the same is related to number of deaths of infants in a given area of population. The gross death rate and net death rate are indicators of mortality in hospitalised patients including infants.

The statistics relating to deaths of infants/children in various Central Government hospitals like Dr. R.M.L. Hospital, Safdarjung Hospital, Kalawati Saran Children's Hospital given in the Statement (*See* below).

Most of the deaths among infants in these Government hospitals occur due to Birth Asphyxia, Neo-natal infaction, Prematurity, Acute Respiratory tract infection, Diarrhoea, Measles, Meningitis, Tubercular Meningitis, severe CNS infections etc. Being tertiary care multi disciplinary treatment institutions, majority of the infant patients arrive in these hospitals at a very late stage and suffer from serious multiple diseases. As a result, many of them die within 48 hours of admission. The admission of complicated pregnancies with delivery of high-risk infants in these hospitals also contribute to infant deaths.

Infants/children admitted in the Central Government Hospitals are provided all possible medical care. Steps for reducing Acquired Infection